

MAGNETIC TAPE / DATASET VOUCHER TRANSMITTAL

Agency No.: _____ Agency Name: _____

	Date Submitted	
* *	Dataset Name	
	Tape Reel Number	
*	Generation Dataset Number	
	Record Count	
	Number of Detail Transactions	
	Number of Batches	
	Dollar Total	
*	IN_Batch_Effective_Date: date to be processed	
*	Payroll Period Ending Date	
*	STARS Document Numbers	

* FOR USE WITH PAYROLL DATA SUBMISSION ONLY

** DATASET NAME FOR PAYROLL DATA SHOULD IDENTIFY WHETHER INFORMATION
APPLIES TO DA-175/DA-176, FUNDING FILE, OR DA-35

NOTE: IF TRANSMITTAL FORM IS FOR PAYROLL DATA, PLEASE SUBMIT 2 COPIES

Authorized By: _____